

CLAIMS ONLY						Application Number 10/1790742	Filing Date			
						Applicant(s)				
						* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*	*	*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1										
2		1		1						
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Total Indep	2		3							
Total Depend	11		19							
Total Claims	13		20							